STATE OF SOUTH DAKOTA SEP 2.5 Statement of Legal Newspaper Ownership and Circulation 2015 as required by SDCI. § 17-2-2.5

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER i		2.D ATE A limited	
La nottera Du	gle.	2.5 ATE 9/17/15	
3.F REQUENCY OF ISSUE 3A. NO OF ISSUES PUBLISH		UAL SUBSCRIPTION	
4 COMPLETE PHYSICAL ADDRESS OF KNOWN OFFICE O			
4. COMPLETE PHYSICAL ADDRESS OF KNOWN OFFICE O	Bossen o	0 57430-006	G
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTE	DE OD CENEDAL DISINESS		9
DUDI ICHED (Madamintana)			
6.FULL NAME OF PUBLISHER: Douglas M. Card			
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the			
names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name			
and address, as well as that of each individual must be given. FULL NAME COMPLETE MAILING ADDRESS			
Marshall County Publishing Inc POBUX69 BIHORSD 57430-acces			
8. KNOWN BONDHOLDERS. MORTGAGES. AND OTHER	SECURITY HOLDERS OWNII	NG OR HOLDING 1'	7,0000
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS. Me state. If more space is needed, list on back of this form.	ORTGAGES OR OTHER SECU	RITIES (If there are none, so	
Alocado space is needed, list on back of his form.	DARING	2 Then Sins	7//24
charles corrections	AVERAGE NO. COPIES	Botten, SiOS	1930
9. EXTENT AND NATURE OF CIRCULATION	EACH	ACTUAL NO. COPIES ISSUED	
	ISSUED PRECEDING 12 MONTHS	NEAREST TO FILING DATE	
A.TOTAL NO. COPIES (Net Press Run)	450	450	
B.PAID AND/OR REQUESTED CIRCULATION			
 Sales through dealers and carriers, street vendors, counter sales, and paid electronic copies. 	15	15	
2. Mail Subscription	Divi	245	
(Paid and or requested) C.TOTAL PAID AND/OR REQUESTED CIRCULATION	271	$-\alpha$	
(Sum of 9B1 and 9B2)	ane	240	
D.FREE DISTRIBUTION	1/2	10	
1. BY MAIL, CARRIER OR OTHER MEANS	10	70	
2. SAMPLES. COMPLIMENTARY AND OTHER FREE COPIES	_		
E.TOTAL DISTRIBUTION (Sum of C. D1 and D2)	286	270	
F. COPIES NOT DISTRIBUTED	201	180	
1. Office use, left over, unaccounted, spoiled after printing	371	130	
2. Return from News Agents	11~~		
G.TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	450	450	
Statement must be signed by Publisher, Business Manag		ee of a Notary Public	
I swear that the statements made by me are true, c	orrect, and complete:		
X Jank M G	Pelstshe	-	
(Signature)	(7	fitle)	
Sworn to before me this 17 day of Olember 3015			
State or Sold Collins & Mallelan Dollar			
County Notary Public Notary Public			
My commission expires:			
(Stal) DELLE			
TOBLIO	My Commission Expires November 25, 2020		